ENTRY BLANK		
PLEASE TYPE (Entered previous May Show
☐ Mr. Artist	orace !	3ishko Hart Nama Last
		(Last Name Last)
Permanent Address 2134	Locusts	T. apt. 10 Phila. Pa,
Stre	et	City
19103	Tel. 215	735-4526
Zip	Area Code	
Temporary or	Samo	
Studio Address_S	treet	City
	Tel. (
Zip	Area Code	
		one of the counties of the were you born in?
Collaborator		
Collaborator	(If Any)	
If May Show enti	ies are not ac	cepted or not sold:
Artist will pi		
☐ Museum shor		ist C.O.D. at this address:
Li Wiuseum shot	ing ship to art	ist C.O.D. at this address.
	nclude below	instructions or a drawing of led and displayed.
This entry blank entry blanks will		made out and signed. Unsigned ed.
Note carefully ca	lendar for del	ivery and return of objects. It is

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 7, 1981.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Mace BishRo